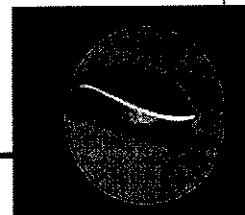


Preapplication for HSIPR Program

OMB No. 2130-0583

Preapplication instructions:

- For each question, enter the appropriate information in the designated gray box; keep text answers brief.
- For a multi-State project/program, States are encouraged to identify a lead applicant.
- Please submit one preapplication for each individual project, planning study, or corridor service program.
- Answers provided in this form will **not** be used for evaluation or selection purposes.
- Applicants should complete and submit this form electronically to: HSIPR@dot.gov.

A. Who are you?

(1) Select applicant type, as defined in Appendix 1.1 of the HSIPR Guidance (*Check the appropriate box from the list*):☒ State☐ Amtrak

If one of the following, please append appropriate documentation as described in Section 4.3.1 of the HSIPR Guidance:

☐ Group of States☐ Interstate Compacts☐ Public Agency established by one or more States☐ Amtrak in cooperation with a State or States

(2) Name of lead State or organization applying: State of Illinois, Department of Transportation

(3) Name(s) of additional States and/or organizations applying in this group (*if applicable*): NA

(4) Application point of contact (POC):

George Weber

POC title:

Chief, Bureau of Railroads

Street address:

100 West Randolph, Suite 6-600

City:

Chicago

State:

IL

Zip code:

60601

Telephone number:

(312) 793-4222

Fax: (312) 793-1251

Email: george.weber@illinois.gov

What is your project?

(5) Project/program name: Chicago To St Louis HSR Corridor - Station/Platform/Parking Improvement Program

(6) Describe the project or program; if a program has multiple phases please describe each and how they fit together; if the project or program relates to another HSIPR application describe the linkage (*less than 1000 characters*):
Second element of the ground work for the HSR Corridor Project approved by FRA under the Final EIS dated January 2003 and any updates. This element consists of the Preliminary Engineering/NEPA for upgrading existing stations/platforms, and providing new stations/platforms/parking to accommodate increased passenger demand associated with the Chicago to St. Louis HSR corridor.

(7) Location information

(A) Describe the location of the proposed project/program (attach map if available) (*less than 250 characters*):
Improvements or new construction needed at 9 stations on Chicago-St. Louis corridor. See map for locations of the proposed rehabilitation and/or new construction of facilities for passenger parking/waiting/boarding along the corridor.

(B) Which high-speed rail and/or intercity passenger rail route(s) benefit from this project? Identify endpoints, major locations served, and name of current route (if applicable) (*less than 250 characters*): Federally designated Chicago to St. Louis High Speed Rail Corridor (currently used by Amtrak Lincoln Service and Texas Eagle long-distance trains), serving major cities of Joliet, Bloomington-Normal, Springfield and Alton, as well as 4 small cities and a suburban Chicago stop.

(C) State(s) in which the project/program investment is/are located: Illinois

(D) State(s) in which the benefiting service(s) is/are located: Illinois/Missouri/Arkansas/Texas

(8) Project/program type:

(A) Types of capital investments contemplated (*Check all that apply*):

- | | |
|---|--|
| <input checked="" type="checkbox"/> Structures (bridges, tunnels, etc.) | <input type="checkbox"/> Rolling Stock Refurbishments |
| <input type="checkbox"/> Track-Rehabilitation | <input type="checkbox"/> Rolling Stock Acquisitions |
| <input type="checkbox"/> Track-New Construction | <input checked="" type="checkbox"/> Stations, Terminals |
| <input type="checkbox"/> New Rights-of-Way | <input type="checkbox"/> Support Facilities (Yards, Shops, etc.) |
| <input type="checkbox"/> Major Interlockings | <input type="checkbox"/> Grade Crossing Improvements |
| <input type="checkbox"/> Communications, Signaling, Control | <input type="checkbox"/> Electric Traction |
| <input checked="" type="checkbox"/> Other (<i>Please describe</i>): platforms/parking | |

(B) Describe the types of proposed improvements (e.g., new passing tracks, interlocking reconfigurations, station improvements, equipment acquisitions, etc.) (*less than 500 characters*): Rehab existing or construct new passenger stations and associated boarding platforms and parking facilities as needed for safe and efficient access to HSR service and to accommodate increasing passenger demand.

(C) Service attributes (*Check all that apply*):

- | | |
|---|---|
| <input type="checkbox"/> Additional Frequencies on Existing Route | <input type="checkbox"/> Improved On-Time-Performance on Existing Route |
| <input type="checkbox"/> New Service | <input type="checkbox"/> Increased Average Speeds/Shorter Trip Times |

☒ Other (Please describe): Accommodation of passenger demand

(9) Project/program milestones (mm/yyyy):

Construction start date:

Various

Construction completion date:

Service improvements realized:

(10) Anticipated benefits (on intercity passenger rail service(s) benefitting from project/program)

Project/Program Benefits	Before (FY 2008 levels)	After (Project completion)	Not Applicable	Not Sure
Annual passenger-miles	86,400,000	336,000,000	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Average daily round trips (weekday)	5	9	<input checked="" type="checkbox"/>	<input type="checkbox"/>
On-time performance (OTP) (at endpoint terminals)	43%	85%	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Top speed (mph)	79	110	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Average operating speed (mph) (between endpoint terminals)	56	70	<input checked="" type="checkbox"/>	<input type="checkbox"/>

What will your project/program cost & how will it be funded?

Capital Costs

(11) Total anticipated project/program capital cost (in millions of dollars)(Note: preapplication estimates will not be binding):
Preliminary design/NEPA to determine construction cost - \$8.0 million; Potential station costs - \$100 million

(12) Will your project/program proposal include matching funds?

(A) ☒ Yes If yes, as what percentage of total costs? 20

☐ No

(B) Proposed source(s) of capital matching funds *(Please check all that apply):*

☒ State

☒ Local

☒ Private

☐ Other *(Please specify):*

☐ N/A

☐ Not sure

(13) If an in-kind match is expected, provide a brief description of the asset *(less than 100 characters)*. Local and Amtrak staff assistance station/platform design standards; railroad coordination, program/project management, property commitments.

Operating Costs

(14) Is the project/program expected to result in an additional annual cost of operations for the benefitting service?

☐ Yes ☐ No ☒ Not sure

(A) If additional operating funding is required, what would be the source? *(Select the appropriate option by clicking the gray box to activate the dropdown menu):*

Not Sure If other is selected, please specify:

(B) What is the status of providing that funding? *(Select the appropriate option by clicking the gray box to activate the dropdown menu):*

Not Sure If other is selected, please specify:

D. What preparation have you done?

(15) Please indicate the status of planning, engineering and environmental studies/documentation supporting your program or project. (Although applicants are asked to respond to all items, note that not all are required for all tracks.)

	No study exists	If no study exists, are you applying for HSIPR funds to complete study?	Study underway	Study completed? (year)	Not applicable
Corridor Service Planning Studies/Documents (for the intercity passenger rail service benefiting from project or program)					
Purpose & Need/Rationale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Service/Operating Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Prioritized Capital Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ridership/Revenue Forecast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Operating Cost Forecast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tier 1 Programmatic (or "service") NEPA (Identify document from dropdown menu) Environmental Impact Statement (EIS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Assessment of Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Project Planning Studies/Documents (if application is for program (multiple projects), multiple boxes may be checked)					
Preliminary Engineering (PE)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tier 2 (project-level) NEPA (Identify document from dropdown menu) Categorical Exclusion (CE)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Detailed Capital Cost Estimates	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment of Benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Planning Studies/Documents					
Project Management Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Financial Plan (capital & operating – sources/uses)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(16) Is the project(s) included in the Statewide Transportation Improvement Program (STIP)? ☐ Yes ☐ No ☒ Not sure

(17) Is the project/program included in a Performance Improvement Plan for the host railroad? ☐ Yes ☐ No ☒ Not sure

(A) Who are your partners & what are their commitments?

- (18) **Right-of-Way Owner(s).** Provide the status of agreements with railroad(s) that own the right-of-way. (If appropriate, "owner(s)" may also include operator(s) under trackage rights or lease agreements.)
(If more than two railroads, please include additional information in question 24.)

Railroad owner 1 (Name):	Union Pacific Corp.
Status of railroad owner 1 (Click on the appropriate option from the dropdown menu shaded in gray):	No agreement, but host railroad supports project
Railroad owner 2 (Name):	CN Corp.
Status of railroad owner 2 (Click on the appropriate option from the dropdown menu shaded in gray):	No agreement, but host railroad supports project

(19) **Intercity Passenger Rail Operator.** If applicable, provide the status of agreements with partner that will operate the benefiting high-speed rail/intercity passenger rail services (e.g., Amtrak). (Click on the appropriate option from the dropdown menu shaded in gray):

No agreement, but partner supports project

(20) **Benefits to Types of Rail Service.** What share of the project/program benefits will accrue to other non-intercity passenger railroad service types (e.g., commuter or freight)? (Click on the appropriate option from the dropdown menu shaded in gray): None

If benefits to non-intercity passenger rail services are foreseen, are cost-sharing agreements in place with the beneficiary organization(s)? ☐ Yes ☒ No ☐ N/A ☐ Not sure

(B) Which track is the best fit for your project/program?

(21) Anticipated HSIPR funding track (Click on the appropriate option from the dropdown menu shaded in gray):

Track 2 (Programs)

If unsure, please explain:

(22) Anticipated application filing date (Check the appropriate box):

☒ 2009 – first round

☐ Subsequent round(s). (Note: Funding for subsequent rounds is not guaranteed.)

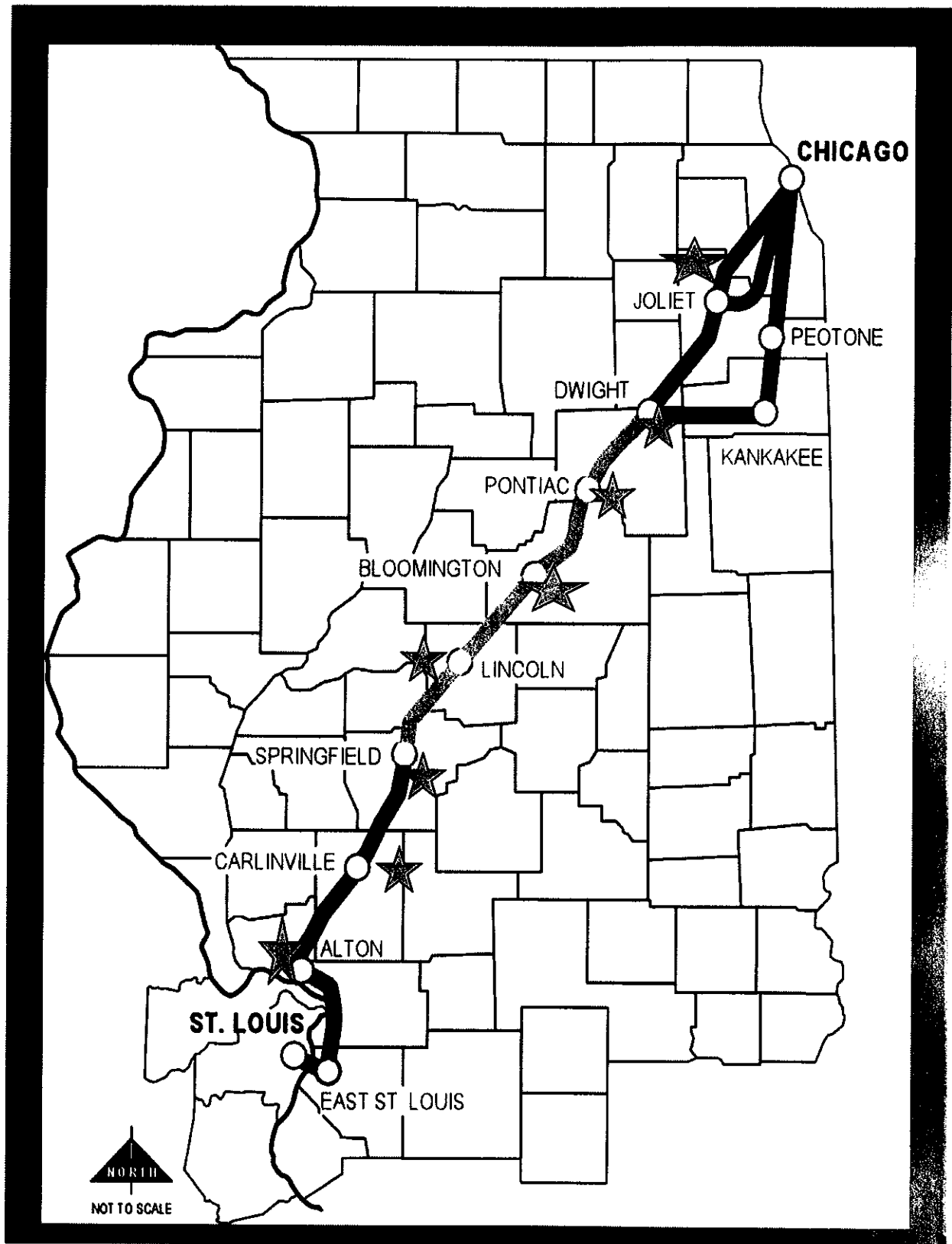
(C) What help do you need?

- (23) Describe any areas in which you could use technical assistance, best practices, advice or support from others (*less than 500 characters*): Assistance from Amtrak for Station and Platform design standards and review will be helpful

(D) Additional information (optional)

- (24) Please provide any additional information, comments, or clarifications. This section is optional. Station control/ownership varies along corridor, all platforms on railroad right-of-way; increased community involvement/support expected as program proceeds.

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**Chicago-St. Louis HSR Corridor
Station Improvement Project Locations**